

Selecting FIMR Forms

Fetal Death (greater than 500 g, greater than 20 weeks gestation)	Neonatal Death (less than 28 days)		Post Neonatal Death (older than 28 days)	
	Died in Hospital	Discharged from Hospital	Died in Hospital	Discharged from Hospital
Prenatal Care Record	Prenatal Care Record	Prenatal Care Record	Prenatal Care Record	Prenatal Care Record
Maternal LDP Record*	Maternal LDP Record	Maternal LDP Record	Maternal LDP Record	Maternal LDP Record
	Newborn Assess. Record	Newborn Assess. Record	Newborn Assess. Record	Newborn Assess. Record
	Newborn ICU Record	Newborn ICU Record	Newborn ICU Record**	Newborn ICU Record**
Placental Exam Record	Placental Exam Record	Placental Exam Record	Placental Exam Record	Placental Exam Record
Maternal Interview	Maternal Interview	Maternal Interview	Maternal Interview	Maternal Interview
		Ambulatory Infant Care Record**	Ambulatory Infant Care Record**	Ambulatory Infant Care Record**
		Pediatric ER &/or Hospitalization Record**	Pediatric ER &/or Hospitalization Record**	Pediatric ER &/or Hospitalization Record**
		Baby Home Supplement	Baby Home Supplement	Baby Home Supplement
Case Review Summary	Case Review Summary	Case Review Summary	Case Review Summary	Case Review Summary

*LDP: Labor, delivery, and postpartum

**Forms may or may not be required depending on individual cases.

This form was adapted from “FIMR FORMS (Modules) Overview” provided by LA County MCAH Program. Special thank you to the County of LA Department of Health Services, MCAH Programs for providing their assistance and resources.